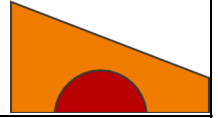


STC Access ID Badge Information Sheet



Name (First) _____ (Middle Initial) _____ (Last) _____

Company _____

Contact Phone Number _____

E-Mail Address _____

New Employee
Card Replacement

New Vendor
Reauthorize Vendor
Badge Expiration Date _____

ALL VENDORS BADGES MUST BE SET TO EXPIRE AT
THE END OF THE PROJECTED WORK FINISH DATE

Badge Authorizer Name (Print) _____

Only Company Authorized Signatories On File With The STC Administrative Office Are Allowed

E-mail completed form to badgeaccess@scott-technology.com or fax to 402-505-7996

Access badges are provided based on terms of the lease.
Additional access badges are subject to a \$45 fee

STC Internal Use

New Employee
New Vendor
Reauthorize Vendor
Card Replacement

ID Verified _____ (Initial)

Badge Number _____

Date _____